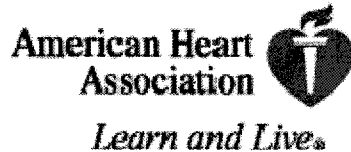


Exhibit No. 1Date 1-26-2009Bill No. SB 63

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1/26/2009

Mr. Chairman, members of the Committee, my name is Cliff Christian and I represent the American Heart Association and the American Stroke Association. We are here today to strongly support SB 63. It's the absolute right thing to do for Montana's approximate 2500 volunteer licensed emergency medical technicians (EMT) who service more than 48 of our 56 counties.

The mission of the American Heart and Stroke Associations is to reduce cardiovascular disease. Today, cardiovascular disease is a leading cause of death among adults. We, estimate sudden cardiac arrest is responsible for about 250 000 out-of-hospital deaths annually in the United States. So, we have a strong interest in helping to improve any modifiable cardiovascular risk or healthcare systems targeted to reducing death and disability from cardiovascular disease.

Heart disease and stroke are the second and fourth leading causes of death here in Montana. The latest available heart and stroke statistics (2005 stats) show almost one-third of all deaths in Montana are attributable to cardiovascular disease. In fact, annually, CVD caused 2,538 deaths among Montanans, 1,842 deaths from heart disease, 521 deaths from stroke and 175 from other CVD (2005 stats). We don't know how many deaths were averted through early intervention by citizens using CPR or an available AED; and it's not possible to calculate how many more deaths would have been attributable to cardiovascular disease had it not been for the courageous actions of Montana's licensed emergency medical technicians intervening. Suffice it to say we could easily surpass 3,000 deaths annually without these interventions. But, we can do better.

Imagine a system of 2500 licensed, trained, volunteer Emergency Medical Technicians, covering 80% of Montana's land masse on a 24/7 basis for no regular salary or benefits? On any given day, these trained, volunteer EMTs would be responsible for about 400,000 folks who live, work, recreate or travel through their territory. Visualize this trained volunteer force responding to over 31,000 **911 medical emergencies in a given year?** Just picture the cost to the taxpayers if these calls had to be answered by salaried employees from the State or local government?

This system exists today. In fact, I'd venture a guess the majority of members on this Committee have one or more volunteer EMS units in your district.

All of the above stats just quoted come from the recently completed Legislative Audit of Montana's volunteer emergency medical system.

Webster's dictionary describes a hero as: "a person admired for his or her achievements and noble qualities; one who shows great courage."

- Like an emergency medical technician who revives a drowning victim.
- An EMT who prevents a person from freezing to death trapped in a winter storm.
- A licensed emergency medical technician who administers care to a child critically injured in an auto accident.

We believe all licensed EMTs meet Webster's definition of a hero. These are our neighbors, our co-workers, our friends and family members who serve.

The peak response time of day for EMS calls, according to the Legislative Auditors, is 10:00am. So, it's important to also commend & support the employers of these EMTs who, generally speaking, allow their employee to leave work to assist in the medical emergency. SB 63 does recognize and support Montana employers who selflessly share their staff with the rest of the community.

This system exists today, but the volunteer force is aging rapidly (now averaging 47 YOA). In fact, there are 70 and yes 90 year old volunteer EMTs still on call, ready to serve. Volunteer EMS units are having difficulty recruiting active members because of factors like:

1. The need for a two – income family
2. The exodus of folks from rural and frontiers areas
3. Burn out
4. The lack of any incentives to continue volunteering medical help at head-on collisions, farm/ranch accidents, heart and stroke attacks.

We are convinced (as are the majority of volunteer EMTs) that this system can be repaired and function well into the future with your help in providing a few recruitment and retention benefits that fall well short of what the state might have to provide without this volunteer force.

SB 63 is a small incentive that will help Montana start stabilizing the base of approximately 2500 licensed volunteers working all across Montana. These Montana heroes work without a regular salary or benefit of any kind. You'll see them on Thanksgiving, Christmas and other family holidays working an automobile accident, structural fires and home emergencies. They're the ones in the middle of the night transporting a heart attack victim from home to a hospital. That trip can sometimes be upwards of 100/200 miles roundtrip. The average age of a volunteer EMT is approaching 50; some are as old as a 72 (a female EMT in the Ryegate area) and 90 (a male EMT in central Montana). Volunteer EMTs currently serving Montana in our rural and frontier areas are aging and few recruits are taking their places. One reason for the lack of ready recruits is the need for two income families; another is the approximate 120 hours of classroom time necessary to obtain an EMT license; and another barrier is the personal commitment of time serving as an EMT once licensed; another obstacle is the amount of time necessary to raise community funds to operate the system (last year, one volunteer EMS held a bake sale to buy tires for the ambulance). Hopefully, the incentives in SB 64 will assist in

retaining existing EMTs and the recruitment of new, younger, volunteers. It's a beginning. But we have a long way to go to begin the stabilization of EMS in 48 of our 56 Counties. One thing is for sure; if we lose our volunteer base of licensed EMTs, Montana will have two choices: One would be to hire people to do the job (about 2500 personnel). The second choice would be to go without any emergency medical services in parts of the State. The first difficult choice is financially prohibitive and the second is unthinkable – but unless we find incentives to recruit and retain a more stable base of volunteer EMTs here in Montana, both of these bad choices will occur. I sincerely hope Montanans are not forced into these Solomon like choices.

SB 63 is the best ROI (return of investment) in the Montana legislature today. We would appreciate your support



## **Exhibit 1**

**This exhibit is a booklet  
entitled:**

**Emergency Medical  
Services (EMS)**

**This exhibit is a small  
booklet which can not be  
scanned, therefore only  
the cover and table of  
contents has been  
scanned to aid in your  
research.**

**The original exhibits are  
on file at the Montana  
Historical Society and  
may be viewed there.**

**Montana Historical Society  
Archives**

**225 N. Roberts**

**Helena MT 59620-1201**

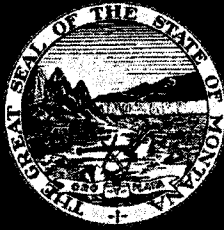
**Phone (406) 444-4774**

**2009 Legislative Scanner Susie Hamilton**

Exhibit No. 1

Date 1-26-2009

Bill No. SB63



A REPORT  
TO THE  
MONTANA  
LEGISLATURE

PERFORMANCE AUDIT

## ***Emergency Medical Services (EMS)***

***Department of Public Health and  
Human Services and the Board  
of Medical Examiners***

JUNE 2008

LEGISLATIVE AUDIT  
DIVISION

07P-11

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